



2301 Curtiss Street Downers Grove, Illinois 60515 708-969-7640 Fax: 708-969-0253

September 30, 1992

Illinois Environmental Protection Agency
Division of Water Pollution Control, Permit Section #15
2200 Churchill Road
Springfield, Illinois 62706 → P.O. Box 19276

Attention: Mr. Tim Kluge

Reference: Storm Water Permits

Dear Mr. Kluge:

In accordance with the requirements set forth in 40 CFR 122 pertaining to storm water discharge from industrial facilities, please find enclosed EPA Form 1 and Form 2F applying for permit coverage for three (3) storm water outfalls.

We have hired Metcalf & Eddy as an engineering consultant to assist us in the storm water permitting program.

Sampling is not yet completed. Upon completion, analytical information will be submitted.

Sincerely,
ARROW GEAR COMPANY

A handwritten signature in cursive script, reading "E. D. Kauzlarich".

E. D. Kauzlarich
V.P. of Facilities

A handwritten signature in cursive script, reading "Richard H. Shapiro".

Richard H. Shapiro
Metallurgist

FORM 1 GENERAL		U.S. ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION Consolidated Permit Program (Read the "General Instructions" before starting.)		EPA NUMBER	
				<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> 1 2 3 </div> <div style="display: flex; justify-content: space-between;"> F D </div> </div>	
GENERAL INSTRUCTIONS If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.					
II. POLLUTANT CHARACTERISTICS INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.					
SPECIFIC QUESTIONS		MARK "X" YES NO FORM ATTACHED		SPECIFIC QUESTIONS	
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.?		<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.?	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above?		<input checked="" type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> 2F		D. Is this a proposed facility (either than those described in A or B above) which will result in a discharge to waters of the U.S.?	
E. Does or will this facility treat, store, or dispose of hazardous wastes?		<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water?	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons?		<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy?	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may effect or be located in an attainment area?		<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may effect or be located in an attainment area?	
		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
III. NAME OF FACILITY <div style="display: flex;"> <div style="width: 5%; text-align: center;">1</div> <div style="width: 95%;"> SKIP Arrow Gear Company </div> </div>					
IV. FACILITY CONTACT <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> A. NAME & TITLE (last, first, & title) <div style="display: flex;"> <div style="width: 5%; text-align: center;">2</div> <div style="width: 95%;">Shapiro Rich Metallurgist</div> </div> </div> <div style="width: 35%;"> B. PHONE (area code & no.) <div style="display: flex;"> <div style="width: 33%; text-align: center;">708</div> <div style="width: 33%; text-align: center;">969</div> <div style="width: 33%; text-align: center;">7640</div> </div> </div> </div>					
V. FACILITY MAILING ADDRESS A. STREET OR P.O. BOX <div style="display: flex;"> <div style="width: 5%; text-align: center;">3</div> <div style="width: 95%;">2301 Curtiss Street</div> </div>					
B. CITY OR TOWN <div style="display: flex;"> <div style="width: 5%; text-align: center;">4</div> <div style="width: 55%;">Downers Grove</div> <div style="width: 10%; text-align: center;">C. STATE</div> <div style="width: 10%; text-align: center;">IL</div> <div style="width: 10%; text-align: center;">D. ZIP CODE</div> <div style="width: 10%; text-align: center;">60515</div> </div>					
VI. FACILITY LOCATION A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER <div style="display: flex;"> <div style="width: 5%; text-align: center;">5</div> <div style="width: 95%;">2301 Curtiss Street</div> </div>					
B. COUNTY NAME <div style="display: flex;"> <div style="width: 5%; text-align: center;">6</div> <div style="width: 95%;">DuPage</div> </div>					
C. CITY OR TOWN <div style="display: flex;"> <div style="width: 5%; text-align: center;">7</div> <div style="width: 55%;">Downers Grove</div> <div style="width: 10%; text-align: center;">D. STATE</div> <div style="width: 10%; text-align: center;">IL</div> <div style="width: 10%; text-align: center;">E. ZIP CODE</div> <div style="width: 10%; text-align: center;">60515</div> <div style="width: 10%; text-align: center;">F. COUNTY CODE</div> <div style="width: 10%; text-align: center;">(if known)</div> </div>					

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST				B. SECOND			
7	3	5	4	7			
(specify) Machine tools, metal cutting type				(specify)			
C. THIRD				D. FOURTH			
7				7			
(specify)				(specify)			

VIII. OPERATOR INFORMATION

A. NAME										B. Is the name listed in Item VIII-A also the owner?	
James J. Cervinka										<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)										D. PHONE (area code & no.)	
F - FEDERAL		M - PUBLIC (other than federal or state)		P - PRIVATE		O - OTHER (specify)		P (specify)		A 708 969 7640	
E. STREET OR P.O. BOX											
2301 Curtiss Street											
F. CITY OR TOWN						G. STATE		H. ZIP CODE		IX. INDIAN LAND	
Downers Grove						IL		60515		Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Waters)				D. PSD (Air Emissions from Proposed Sources)			
9	N	IL0038016		9	P		
B. UIC (Underground Injection of Fluids)				E. OTHER (specify)			
9	U			9		(specify)	
C. RCRA (Hazardous Wastes)				E. OTHER (specify)			
9	R	ILD005075205		9		(specify)	

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

Manufacturer of metal gears from raw material to end product. Process includes turning, gear cutting, heat treatment, and grinding.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

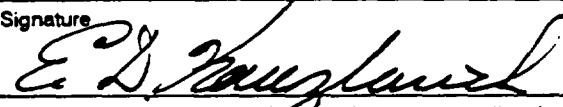
A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
E. D. Kauzlarich Vice President	<i>E. D. Kauzlarich</i>	9-29-90

COMMENTS FOR OFFICIAL USE ONLY

C	
C	

Please print or type in the unshaded areas only

Form 2F NPDES	United States Environmental Protection Agency Washington, DC 20460 Application for Permit to Discharge Stormwater Discharges Associated with Industrial Activity																																																																													
Paperwork Reduction Act Notice Public reporting burden for this application is estimated to average 28.6 hours per application, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate, any other aspect of this collection of information, or suggestions for improving this form, including suggestions which may increase or reduce this burden to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., SW, Washington, DC 20460, or Director, Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503																																																																														
I. Outfall Location																																																																														
For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.																																																																														
A. Outfall Number <i>(list)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="3" style="width: 30%;">B. Latitude</th> <th colspan="3" style="width: 30%;">C. Longitude</th> <th style="width: 40%;">D. Receiving Water <i>(name)</i></th> </tr> <tr> <td style="width: 10%;">1</td> <td style="width: 10%;">41</td> <td style="width: 10%;">47 30</td> <td style="width: 10%;">88</td> <td style="width: 10%;">02</td> <td style="width: 10%;">00</td> <td>St. Joseph Creek</td> </tr> <tr> <td>2</td> <td>41</td> <td>47 30</td> <td>88</td> <td>02</td> <td>00</td> <td>St. Joseph Creek</td> </tr> <tr> <td>3</td> <td>41</td> <td>47 30</td> <td>88</td> <td>02</td> <td>00</td> <td>St. Joseph Creek</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>	B. Latitude			C. Longitude			D. Receiving Water <i>(name)</i>	1	41	47 30	88	02	00	St. Joseph Creek	2	41	47 30	88	02	00	St. Joseph Creek	3	41	47 30	88	02	00	St. Joseph Creek																																																	
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II. Improvements																																																																														
A. Are you now required by any Federal, State, or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders and grant or loan conditions.																																																																														
1. Identification of Conditions, Agreements, Etc.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="width: 40%;">2. Affected Outfalls</th> <th rowspan="2" style="width: 35%;">3. Brief Description of Project</th> <th colspan="2" style="width: 25%;">4. Final Compliance Date</th> </tr> <tr> <th style="width: 15%;">number</th> <th style="width: 25%;">source of discharge</th> <th style="width: 12.5%;">a. req.</th> <th style="width: 12.5%;">b. proj.</th> </tr> <tr> <td>NONE</td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>	2. Affected Outfalls		3. Brief Description of Project	4. Final Compliance Date		number	source of discharge	a. req.	b. proj.	NONE																																																																			
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B. You may attach additional sheets describing any additional water pollution (or other environmental projects which may affect your discharges) you now have under way or which you plan. Indicate whether each program is now under way or planned, and indicate your actual or planned schedules for construction.																																																																														
III. Site Drainage Map																																																																														
Attach a site map showing topography (or indicating the outline of drainage areas served by the outfall(s) covered in the application if a topographic map is unavailable) depicting the facility including: each of its intake and discharge structures; the drainage area of each storm water outfall; paved areas and buildings within the drainage area of each storm water outfall, each known past or present areas used for outdoor storage or disposal of significant materials, each existing structural control measure to reduce pollutants in storm water runoff, materials loading and access areas, areas where pesticides, herbicides, soil conditioners and fertilizers are applied; each of its hazardous waste treatment, storage or disposal units (including each area not required to have a RCRA permit which is used for accumulating hazardous waste under 40 CFR 262.34); each well where fluids from the facility are injected underground; springs, and other surface water bodies which receive storm water discharges from the facility.																																																																														

IV. Narrative Description of Pollutant Sources					
A. For each outfall, provide an estimate of the area (include units) of impervious surfaces (including paved areas and building roofs) drained to the outfall, and an estimate of the total surface area drained by the outfall.					
Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)	Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)
1	75,000 sq. ft.	75,000 sq. ft.			
2	49,375 sq. ft.	49,375 sq. ft.			
3	13,750 sq. ft.	13,750 sq. ft.			
B. Provide a narrative description of significant materials that are currently or in the past three years have been treated, stored or disposed in a manner to allow exposure to storm water; method of treatment, storage, or disposal; past and present materials management practices employed, in the last three years, to minimize contact by these materials with storm water runoff; materials loading and access areas; and the location, manner, and frequency in which pesticides, herbicides, soil conditioners, and fertilizers are applied.					
<p>There is a covered oil waste storage dumpster located on the south west side of the main facility. Hydraulic and cutting waste oils as well as oil absorbents are stored here. This dumpster provides temporary storage until it is emptied on a regular basis.</p> <p>There are covered storage barrels located at the southwest corner of the main facility. These barrels contain vapor degreasers, synthetic coolants, mineral spirits, hydraulic oils, and cutting oils.</p> <p>There is a raw material storage area located in the southwest corner of the main facility. This material is uncovered and consists of metal parts.</p> <p>There are various trash dumpsters located throughout the site.</p>					
C. For each outfall, provide the location and a description of existing structural and nonstructural control measures to reduce pollutants in storm water runoff; and a description of the treatment the storm water receives, including the schedule and type of maintenance for control and treatment measures and the ultimate disposal of any solid or fluid wastes other than by discharge.					
Outfall Number	Treatment				List Codes from Table 2F-1
2	Outfall #2 is located west of the facility and discharges to a retention area.				
V. Nonstormwater Discharges					
A. I certify under penalty of law that the outfall(s) covered by this application have been tested or evaluated for the presence of nonstormwater discharges, and that all nonstormwater discharges from these outfall(s) are identified in either an accompanying Form 2C or Form 2E application for the outfall.					
Name and Official Title (type or print) E. D. Kauzlarich Vice President		Signature 		Date Signed 9-29-92	
B. Provide a description of the method used, the date of any testing, and the onsite drainage points that were directly observed during a test.					
<p>Visual inspection of the outfalls in dry weather during the week of September 21, 1992 showed no flow at the outfalls except for Outfall #1 which was found to have a cooling water discharge consistent with the facility's existing NPDES permit for that discharge.</p> <p>In addition, an outfall not associated with significant activity is located north of the facility and discharges condensate from air conditioners.</p>					
VI. Significant Leaks or Spills					
Provide existing information regarding the history of significant leaks or spills of toxic or hazardous pollutants at the facility in the last three years, including the approximate date and location of the spill or leak, and the type and amount of material released.					
NONE					

Continued from Page 2

VII. Discharge Information

A, B, C, & D See instructions before proceeding. Complete one set of tables for each outfall. Annotate the outfall number in the space provided. Tables VII-A, VII-B, and VII-C are included on separate sheets numbered VII-1 and VII-2.

- E: Potential discharges not covered by analysis - Is any pollutant listed in Table 2F-2 a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

☒ Yes (list all such pollutants below)

☐ No (go to section IX)

All pollutants listed in Table 2F-2 that are used at the facility will be included in the analytical analysis and reported in Section VII Part C.

VII. Biological Toxicity Testing Data

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☐ Yes (list all such pollutants below)

☒ No (go to section IX)
IX. Contract Analysis Information

Were any of the analyses reported in item VII performed by a contract laboratory or consulting firm?

☐ Yes (list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below)

☒ No (go to Section X)

A. Name	B. Address	C. Area Code & Phone No.	D. Pollutants Analyzed

X. Certification

I certify under penalty of law that this document and all attachments were prepared under supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. Name & Official Title (type or print)

E. D. Kauzlarich
Vice President

B. Area Code and Phone No.

(708) 969-7640

C. Signature

E. D. Kauzlarich

D. Date Signed

9-29-92

Table 2F-2

Conventional and Nonconventional Pollutants Required To Be Tested by Existing Discharger if Expected To Be Present

Bromide
Chlorine, Total Residual
Color
Fecal Coliform
Fluoride
Nitrate-Nitrite
Nitrogen, Total Kjeldahl
Oil and Grease
Phosphorus, Total Radioactivity
Sulfate
Sulfide
Sulfite
Surfactants
Aluminum, Total
Barium, Total
Boron, Total
Cobalt, Total
Iron, Total
Magnesium, Total
Molybdenum, Total
Magnesium, Total
Tin, Total
Titanium, Total

Table 2F-3
Toxic pollutants required to be
identified by applicant if expected to be present

Toxic Pollutants and Total Phenol		
Antimony, Total	Copper, Total	Silver, Total
Arsenic, Total	Lead, Total	Thallium, Total
Beryllium, Total	Mercury, Total	Zinc, Total
Cadmium, Total	<u>Nickel, Total</u>	Cyanide, Total
<u>Chromium, Total</u>	Selenium, Total	Phenols, Total
GC/MS Fraction Volatiles Compounds		
Acrolein	Dichlorobromomethane	1,1,2,2-Tetrachloroethane
Acrylonitrile	1,1-Dichloroethane	Tetrachloroethylene
Benzene	1,2-Dichloroethane	Toluene
Bromoform	1,1-Dichloroethylene	1,2-Trans-Dichloroethylene
Carbon Tetrachloride	1,2-Dichloropropane	1,1,1-Trichloroethane
Chlorobenzene	1,3-Dichloropropylene	1,1,2-Trichloroethane
Chlorodibromomethane	Ethylbenzene	<u>Trichloroethylene</u>
Chloroethane	Methyl Bromide	Vinyl Chloride
2-Chloroethylvinyl Ether	Methyl Chloride	
Chloroform	Methylene Chloride	
Acid Compounds		
2-Chlorophenol	2,4-Dinitrophenol	Pentachlorophenol
2,4-Dichlorophenol	2-Nitrophenol	Phenol
2,4-Dimethylphenol	4-Nitrophenol	2,4,6-Trichlorophenol
4,6-Dinitro-O-Cresol	p-Chloro-M-Cresol	
Base/Neutral		
Acenaphthene	2-Chloronaphthalene	Fluoranthene
Acenaphthylene	4-Chlorophenyl Phenyl Ether	Fluorene
Anthracene	Chrysene	Hexachlorobenzene
Benzidine	Dibenzo(a,h)anthracene	Hexachlorobutadiene
Benzo(a)anthracene	1,2-Dichlorobenzene	Hexachloroethane
Benzo(a)pyrene	1,3-Dichlorobenzene	Indeno(1,2,3-cd)pyrene
3,4-Benzofluoranthene	1,4-Dichlorobenzene	Isophorone
Benzo(ghi)perylene	3,3'-Dichlorobenzidine	Napthalene
Benzo(k)fluoranthene	Diethyl Phthalate	Nitrobenzene
Bis(2-chloroethoxy)methane	Dimethyl Phthalate	N-Nitrosodimethylamine
Bis(2-chloroethyl)ether	Di-N-Butyl Phthalate	N-Nitrosodi-N-Propylamine
Bis(2-chloroisopropyl)ether	2,4-Dinitrotoluene	N-Nitrosodiphenylamine
Bis(2-ethylhexyl)phthalate	2,6-Dinitrotoluene	Phenanthrene
4-Bromophenyl Phenyl Ether	Di-N-Octylphthalate	Pyrene
Butylbenzyl Phthalate	1,2-Diphenylhydrazine (as Azoben- zene)	1,2,4-Trichlorobenzene
Pesticides		
Aldrin	Dieldrin	PCB-1254
Alpha-BHC	Alpha-Endosulfan	PCB-1221
Beta-BHC	Beta-Endosulfan	PCB-1232
Gamma-BHC	Endosulfan Sulfate	PCB-1248
Delta-BHC	Endrin	PCB-1260
Chlordane	Endrin Aldehyde	PCB-1016
4,4'-DDT	Heptachlor	Toxaphene
4,4'-DDE	Heptachlor Epoxide	
4,4'-DDD	PCB-1242	